

**ROCKINGHAM COUNTY  
DEPARTMENT OF PUBLIC WORKS  
20 East Gay Street  
Harrisonburg, Virginia 22802  
(540) 564-3020 Fax: (540) 564-3048  
[www.rockinghamcountyva.gov](http://www.rockinghamcountyva.gov)**

Date \_\_\_\_\_

**WATER AND SEWER  
APPLICATION FOR SERVICE**

I (we) \_\_\_\_\_ hereby make application for  
water \_\_\_\_\_ and/or \_\_\_\_\_ sewer service to the premises located at \_\_\_\_\_  
zip code \_\_\_\_\_ Subdivision \_\_\_\_\_.

**Please make service effective (date)** \_\_\_\_\_. I am (we are) the owner \_\_\_\_\_,  
or tenant \_\_\_\_\_. If tenant, the owner is \_\_\_\_\_ and has indicated  
approval of the County's provision of service. I (we) understand that connections made are to be in  
conformance with existing policies and ordinances of Rockingham County and agree to pay for  
service(s) at the rates and fees established by and as may be revised by the Rockingham County  
Board of Supervisors. I (we) further understand that service(s) may be discontinued in the event bills  
are not paid when due.

\_\_\_\_\_ Telephone

\_\_\_\_\_ Telephone

\_\_\_\_\_  
Signature of Owner

\_\_\_\_\_  
ID # or Social Security Number

**Applicant Mailing address:**  
(if different from service):  
\_\_\_\_\_  
\_\_\_\_\_

\_\_\_\_\_  
Signature of Applicant or Agent

\_\_\_\_\_

\_\_\_\_\_

**A copy of your drivers license and / or social security card is required for service.**

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*(For Office Use)*

Date of Service \_\_\_\_\_

**WATER** Service Area \_\_\_\_\_

Old Account # \_\_\_\_\_ / \_\_\_\_\_

**SEWER** Service Area \_\_\_\_\_

Meter Number \_\_\_\_\_ Read = \_\_\_\_\_

**OWNER Deposit**     \$ 50     **Water**  
                             \$ 50     **Sewer**  
                             \$ 100    **Both**

Cash \_\_\_\_\_ Check # \_\_\_\_\_ Receipt # \_\_\_\_\_

Book Number \_\_\_\_\_ Page # \_\_\_\_\_

**Deposits are refunded after 12 consecutive  
months of payments received on time, no  
interest charges.**

Customer Number \_\_\_\_\_

City Account # \_\_\_\_\_



Received By \_\_\_\_\_

**RENTOR Deposit**     \$ 75     **Water**  
                             \$ 75     **Sewer**  
                             \$ 150    **Both**

## **Rockingham County Public Works**

### **Water / Sewer Cut-Off Policy**

All accounts with a balance forward are subject to cut-off.

Cut-offs are performed around the 15<sup>th</sup> of the month starting promptly at 6:30 a.m. If your **Past Due** amount is not paid in full by 5:00 p.m. the day before cut-offs your account is in the cut-off status. Electronic payments made through the County website require 48 hrs to be processed. (Electronic payments made through your bank may take up to 10 days to process. In this instance accounts will still be placed in the cut-off status due to the 10 day processing period.)

If your account is in the cut-off status, you are required to pay the **full Amount Due** at the Treasurer's Office, and a separate \$25.00 service fee at the Public Works Office. Public Works can only accept a check or exact cash for service fees. All checks should be made payable to Rockingham County.

**At the Treasurer's Office, credit / debit cards are accepted for payment for a \$3.99 fee.** Electronic payments can be made on-line at [Rockinghamcountyva.gov](http://Rockinghamcountyva.gov) for a \$ 3.99 fee. If an electronic payment is made after an account is placed in the cut-off status, you still owe the \$25.00 service fee payable in the Public Works Office. You must present the electronic receipt from the Rockingham County website for verification of payment.

**No payments can be made over the phone with credit / debit cards.**

Utilities will be notified to turn the service on after the service fee is paid at the Public Works Office. The service will be turned back on before the end of the business day.